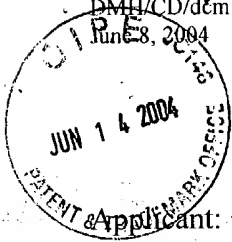


67 AF/1645
#



NOTICE OF APPEAL FROM THE EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Applicant: Mitchell C. Sanders

Serial No.: 09/848,781

Group: 1645

Filed: May 3, 2001

Examiner: Shahnan Shah, Khatol S.

JUN 17 2004

TECH CENTER 4300/23

Confirmation No.: 6639

For: A DEVICE FOR DETECTING BACTERIAL CONTAMINATION
AND METHOD OF USE

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
6-7-04	Dawn M Myers
Date	Signature
Dawn M Myers	
Typed or printed name of person signing certificate	

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

06/15/2004 JADD01 00000022 09848781

01 FC:2253
02 FC:2401

475.00 OP
165.00 OP

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated December 8, 2003 of the Examiner finally rejecting claims 1-3, 10 and 12. The item(s) checked below are appropriate:

1. ☒ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated December 8, 2003 for three months from March 8, 2004 to June 8, 2004.
2. ☐ A month extension of time to respond to the Office Action Made Final dated was filed on with payment of a \$ fee.
☐ Applicant hereby petitions for an additional month extension of time to respond to the Office Action Made Final.
3. ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

4. Fees are submitted for the following:

<input checked="" type="checkbox"/>	Extension of Time for three months		\$ 475
<input type="checkbox"/>	Additional Extension of Time:		
	Fee for Extension	(<input type="checkbox"/> mo.)	\$ _____
	Less fee paid	(<input type="checkbox"/> mo.)	- \$ _____
	Balance of fee due		\$ 0
<input checked="" type="checkbox"/>	Notice of Appeal		\$ 165
<input type="checkbox"/>	Other	_____	\$ _____
		TOTAL	\$ 640

5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$640.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

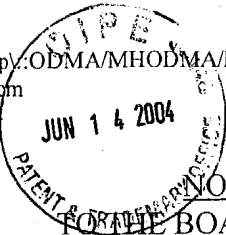
Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By Doreen M. Hogle
Doreen M. Hogle
Registration No.: 36,361
Telephone: (978) 341-0036
Facsimile: (978) 341-0136

Concord, MA 01742-9133

Date: June 7, 2004



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<input checked="" type="checkbox"/>	Extension of Time for three months		\$ 475
<input type="checkbox"/>	Additional Extension of Time:		
	Fee for Extension	(<input type="text"/> mo.)	\$ _____
	Less fee paid	(<input type="text"/> mo.)	- \$ _____
	Balance of fee due		\$ 0
<input checked="" type="checkbox"/>	Notice of Appeal		\$ 165
<input type="checkbox"/>	Other _____		\$ _____
		TOTAL	\$ 640

[X] A check in the amount of \$640.00 is enclosed.

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Date: June 7, 2004